

CITY OF MIDDLETOWN Office of the General Counsel HUMAN RESOURCES DIVISION 245 deKoven Drive Middletown, CT. 06457 860-638-4940



www.middletownCT.gov

CONNECTICUT CERTIFIED POLICE OFFICER APPLICATION FOR EMPLOYMENT & EXAMINATION

Please Type or Print in Ink – You must complete all sections of this form. Incomplete applications may be rejected. First Name: Middle Home Address: Street No., Apt. Zip City State Cell #: _____ Area Code/Telephone – Home: _____ Email Address: Are you a United States Citizen? Yes _____ No ____ (Proof of citizenship shall be required upon appointment) Do you have a valid Connecticut Motor Vehicle Operator's License? Yes _____ No ____ Operator No. Are you able to speak, read and write the English language? Yes No _____ **NOTICE:** Public Act No. 02-136 – Disclosure: An applicant is not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased; Criminal records subject to erasure are records pertaining to a finding of delinquency or that a child was a member of a family with service needs, adjudication as a youthful offender, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon; and, That any person whose criminal records have been erased shall be deemed to have never been arrested within the meaning of the general statues with respect to the proceedings so erased and may swear under oath. Have you ever been convicted under federal or state law of any felony; or, any Class A or Class B misdemeanor; or, of any misdemeanor crime involving domestic violence; or, of any act which would constitute perjury or false statement? No _____ Yes ____ (If Yes, Explain below)

The City of Middletown is an Affirmative Action/Equal Opportunity Employer

	d from High School or	_	ducational Dev	relopment Test (GED)?
	Name of School & Location	Dates Attended FromTo	Did You Graduate?	Degree Received Specialization/Major
College or				,
echnical School				
College or				
raduate School				
Ailitary or Other				
raining				
ETERAN'S PREFI	ERENCE:			
emarriage, who ear credit of ten (10) po	n a passing grade shall ha	ive, if claimed, a credit of final earned rating of an	of five (5) points y such veteran v	 or their wives or their widows until sadded to the final earned rating. A who is eligible for disability or their widows until
Do you claim Wa	r Veteran's Preferenc	ce? (5 points) Yes		. No
If yes, check one	•			
	veteran			
	se of a war veteran not			
3) As the sui	viving spouse of a war	veteran		
If yes, check one of the characteristics of the characteristics (1) As a Disarrange of the characteristics (1) As a spour		not gainfully employ	red due to disal	
MPORTANT: Pro	oof of right to Veteran	's Preference (DD21	4) must be su	bmitted with application.
certified police of		Connecticut and mus	t have served	etown Police Department must a minimum of 2 years a s a full t State Police.
			saaking a lata	ral transfar?
re you now, a St	ate of Connecticut cer	tified Police Officer	scening a late	iai transier:

MPLOYMENT HISTORY				
sheets of plain paper and attach to	ent job, listing <u>all</u> employers. Please your application, if needed, to provide ay submit a resume, but not in place	de other relevant employn	nent info	
ame of Employer:		Phone:		
Address:Street				
			State	Zip Code
ob Title:	Na	me of Supervisor:		
Employed From:	To:	Full Time:		Part Time:
eason for Leaving:	Sa	lary:		_
Name of Employer:				
Name of Employer: Address: Street	City		State	Zip Code
Address: Street ob Title:	City Na	Phone:	State	Zip Code
Address:Street ob Title: Cmployed From:	City Na To:	Phone: me of Supervisor: Full Time:	State	Zip Code Part Time:
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Address:Street ob Title: Comployed From: Reason for Leaving:	CityNa	Phone: ame of Supervisor: Full Time: lary:	State	Zip Code Part Time:
Name of Employer:Address:Street Tob Title: Employed From: Reason for Leaving: Description of Duties (include and	City Na To: Sa ny machines operated, training, o	Phone: me of Supervisor: Full Time: lary: computer use, etc.)	State	Zip Code Part Time:
Name of Employer: Address: Street Tob Title: Employed From: Reason for Leaving: Description of Duties (include and include an	City Na To: Sa ny machines operated, training, o	Phone: Time of Supervisor: Full Time: computer use, etc.)	State	Zip Code Part Time:
Name of Employer: Address: Street Job Title: Employed From: Reason for Leaving: Description of Duties (include and include and inclu	City Na To:Sa ny machines operated, training, o	Phone: Time of Supervisor: Full Time: computer use, etc.) Phone:	State	Zip Code Part Time:
Name of Employer: Address: Street Street Employed From: Reason for Leaving: Description of Duties (include and include a	City Na To:Sa ny machines operated, training, o	Phone: Time of Supervisor: Full Time: computer use, etc.) Phone:	State	Zip Code Part Time:

Employed From:	То:	Full Time:	Part Time:	
Reason for Leaving:	s	Salary:		
Description of Duties (include an	y machines operated, training.	, computer use, etc.)		
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The hiring process for Police Officer shall include an application, written examination, oral examination, physical ability assessment, psychological evaluation, fingerprinting, background investigation, oral interview and post-offer physical examination which may include drug screening. Failure to pass any facet of this process may result in disqualification or the withdrawal of any offer of employment.

Applications submitted for employment may be public records. The City of Middletown cannot assume responsibility for the confidentiality of information provided on an employment application.

I have read the above statements and understand them.	
Signature:	Date:
I certify, under Middletown Ordinance S 74-2 (formerle that I have read this application and supporting information; correct, complete and not misleading to the best of my will rely upon this information in considering my appearance misstatements or omissions of facts I am subject to prosecution for false statement under the General State or other party by or on behalf of the City will not be reincomplete information in the application or supporting persons and companies cited on the employment applications release them from all liability for damage for providing I have read the above statements and understand them.	mation and that all information provided is true knowledge and belief. I understand that the civilication for employment and that if I knowing to disqualification, dismissal from employment, utes; and, that the city, or its insurance companies ponsible for any loss resulting from incorrect granterial. I give consent for you to check with a ation, except my present employer if so noted, and
Signature:	Date:
In order to assist us with future recruitment efforts, please let Check any that apply.	
Posting, public bulletin board	
Posting, community agency or social organization (name)	
Posting, School or College (name)	
City of Middletown Website	
Police Certification.com Website	
Middletown Police Department	
Friend or relative	
Other (specify)	

EQUAL EMPLOYMENT OPPORTUNITY

VOLUNTARY COMPLIANCE INFORMATION:

The following information is needed in order to meet the Federal and State reporting requirements and for Equal Employment Opportunity reports. It is also used to evaluate the effectiveness of our recruiting and testing procedures. This information will not be used in the selection process. It is kept separate from your application and is not seen by anyone making the hiring decision.

Your Name:	
Sex (please check one)	male
Race or Ethnic Group (describe yourself in terms of	of one of the following groups):
☐ White/Caucasian	Hispanic/Latino
☐ Black/African American	☐ American Native or Alaskan Native
☐ Asian	Native Hawaiian or Other Pacific Islander
Two or More Races (persons who iden	ntify with two or more racial categories listed above)
Military Veteran Status:	
☐ Veteran of the United States Armed Fo	orces
☐ Disabled Veteran of the Untired States	Armed Forces